

SLIGO COUNTY COUNCIL

Comhairle Chontae Shligigh

APPLICATION FORM FOR EXTENSION OF DURATION OF PLANNING PERMISSION

(Planning & Development Act 2000 to 2021)

BEFORE FILLING OUT THIS FORM PLEASE NOTE THE FOLLOWING:

In accordance with Section 42 of the Planning and Development Act 2000 (As Amended), and Regulations made thereunder, a Planning Authority shall extend a permission as appropriate provided that the application is made in accordance with regulations made under the Act and the Authority is satisfied in relation to the permission that:-

To extend the appropriate period:

- (i) The development to which such permission relates commenced before the expiration of the appropriate period sought to be extended, and
- (ii) Substantial works were carried out pursuant to such permission during such period.
- (iii) The development will be completed within a reasonable time.

Important Note:

An application to EXTEND the appropriate period shall be made prior to the expiration of the appropriate period but not earlier than 1 year before the expiration of the appropriate period sought to be extended.

The power to extend the appropriate period shall not apply to the grant of an OUTLINE PERMISSION granted under Section 34 of the Planning and Development Act, 2000(as amended)



Address: Sligo County Council,

City Hall,

Planning Section

SLIGO COUNTY COUNCIL Comhairle Chontae Shligigh

APPLICATION FORM FOR EXTENSION OF DURATION OF PLANNING PERMISSION

(Planning & Development Act 2000 to 2021)

E-mail: planning@sligococo.ie

Website address: www.sligococo.ie

Tel: (071) 9114458 / 9114455

Fax: (071) 9114499

		Sligo		
1.		Name of applicant(s):		
		Address and contact details to be supplied at the end of this form		
2.		Name of agent (if any):		
		Address and contact details to be supplied at the end of this form:		
3.		State applicant's legal interest in the land subject to this application. Owner /Leasee (if other please specify interest)		
4.		Description of Permission for which Extension is sought:		
5.				
	a)	Ref. No. of Permission:		
	b)	Location Townland or postal address of land, structure, development:		
	c)	State whether Permission or Permission Consequent:		
	d)	Date Permission Granted:		
	e)	Date Permission will cease to have effect:		
	f)	State period by which the permission is sought to be extended:		

6.	Particulars of substantial works carried out/or which will be carried out pursuant to the				
	permission beforethe expiration	n of the appropriate period:			
	Date work commenced:				
7.		proposed to be carried out pursuant to the permission in the permission is sought to be further extended:			
	State date on which the develo	opment is expected to be completed:			
8.	Fee €62.00 enclosed Yes: []				
	No: []				
l certi	ify that the information given her	rein is correct and I hereby apply for an extension of the above			
plann	ingpermission pursuant to the P	lanning & Development Act 2000 (as amended).			
SIGN	ATURE OF APPLICANT/AGENT:				
	DATE:				
	_				
his ap	oplication form and relevant fee ((€62.00) should be submitted to:			
_	County Council,	Telephone No. 071-9114458			
City F	Street	E-Mail planning@sligococo.ie			

ADDITIONAL CONTACT INFORMATION

Applicant Address/Contact Details:

Name of Applicant:				
Address of Applicant:				
Telephone No.:				
Email Address (if any):				
Agents Contact Details (if any)				
Name of Agent:				
Address of Agent:				
Telephone No.:				
Email Address (if any):				
Should all correspondence be sent to the Agents address? (please tick appropriate box) (Please note that if the answer is 'No', all correspondence will be sent to the Applicant's address)				
Ves [] No []				
Voc III No				

Additional Contact Information

The provision of additional contact information such as email addresses or telephone numbers is voluntary and will only be used by the Planning Authority to contact you should it be deemed necessary for the purposes of administering the application. These additional details will not be made available to any third party.